

WEEKLY BULLETIN

JUN 9 1943
CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH
University of California
ESTABLISHED APRIL 15, 1870
WILTON L. HALVERSON, M.D., Director



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LOS ANGELES, STATE OFFICE BLDG., 217 W. FIRST ST., MA 1271

Vol. XXII, No. 17

MAY 15, 1943

GUY P. JONES
Editor

REGULATIONS OF THE CALIFORNIA STATE BOARD OF PUBLIC HEALTH FOR THE CONTROL OF COMMUNICABLE DISEASE

(Continued from last issue)

Food Poisoning

SECTION 64

- (a) The health officer shall make an investigation in an effort to determine the cause. In the event that a commercial product is suspected the health officer shall notify the State Department of Public Health at once and hold all such specimens for examination in a laboratory approved by the State Department of Public Health.
- (b) The definition as to what shall constitute a reportable case of food poisoning shall be as follows:
 1. Poisoning from organic poisons present in normal animal and plant tissues, including mushrooms, fish, and mussels.
 2. Poisoning following the consumption of food into which mineral or organic poisons or preservatives, including arsenic, lead, cadmium, fluorine, have been introduced by accident or with the intent to improve the appearance or the keeping quality.
 3. Infections due to the consumption of food containing bacteria of the Salmonella group.
 4. Poisoning due to the deleterious substances (toxins) produced in food by the growth of bacteria, molds, or similar organisms.

German Measles

SECTION 65

Isolation shall be as defined in Section 37. The patient shall be isolated until clinically recovered. When the patient is properly isolated, members of the family or household are not subject to restriction.

Glanders

SECTION 66

Isolation shall be as defined in Section 37. The patient shall be isolated until the lesions have healed. When the patient is properly isolated members of the family or household need not be subject to restrictions.

Gonococcus Infection

SECTION 67

See Sections 105 to 120.

Granuloma Inguinale

SECTION 68

See Sections 105 to 120.

Influenza

(Epidemic type)

SECTION 69

Isolation shall be as defined in Section 37. The patient shall be isolated during the acute symptoms. When the patient is properly isolated no restrictions need be placed upon the contacts.

Jaundice

(Infectious)—(infectious hepatitis)

SECTION 70

Isolation shall be as defined in Section 37. The patient shall be isolated during the acute symptoms. No restrictions need be exercised over contacts.

Leprosy

SECTION 71

Isolation shall be as defined in Section 36. Quarantine of the premises may be at times advisable. The patient shall be kept under strict isolation until determined by clinical observation, and by the absence of acid-fast bacilli on repeated examinations, to be apparently arrested. Contacts shall be kept under observation over a period of years to determine if they have become infected.

Lymphogranuloma Venereum

SECTION 72

See Sections 105 to 120.

Malaria

SECTION 73

The patient shall be confined in a room or dwelling satisfactorily screened and be protected from the bites of mosquitoes during the stages in which the malarial parasites may be in the blood.

Measles

SECTION 74

Isolation shall be as defined in Section 37.

(a) Case

The patient shall be isolated during the period of catarrhal symptoms and for seven days after the appearance of the rash.

(b) Adult Contacts

No restrictions.

(c) Immune Children

Children giving evidence satisfactory to the health officer of having had the disease are not subject to any restrictions.

(d) Non-immune Children

Non-immune children shall be subject to the same isolation as the patient and kept under observation for two weeks from date of last exposure. If medical inspection is available and the child can be inspected daily before entering the classroom, this requirement may be waived, if in the opinion of the local health officer such procedure is advisable, and the child may continue school until the onset of symptoms. If the health officer is able to determine the definite date of exposure then the period of isolation may be from the 7th to 14th day if in the opinion of the health officer such a procedure is advisable.

Meningitis
(Meningococcic)

SECTION 75

Quarantine shall be as defined in Section 35.

(a) Case

The period of quarantine shall be for at least 14 days from the onset of the disease, and thereafter until all acute symptoms have subsided.

(b) Household Contacts

If the patient is isolated and the premises quarantined, the members of the household shall be confined to the quarantined area except at the discretion of the health officer the wage earners may be released from the quarantined area to live elsewhere providing their occupations do not bring them in close association with other persons.

(c) Casual Contacts

Casual contacts shall be placed under observation for a period of 14 days after last exposure.

Mumps

SECTION 76

Isolation shall be as defined in Section 37.

(a) Case

The patient shall be isolated during the period of initial symptoms and until the swelling of the salivary glands has subsided.

(b) Contacts

No restrictions.

Paratyphoid Fever
(A and B)

SECTION 77

The period of isolation and the restrictions imposed shall be the same as for typhoid fever.

Plague

SECTION 78

Quarantine shall be as defined in Section 35. Also see Section 15.

(a) Case

The local health authority shall communicate immediately with the Director, State Department of Public Health by telephone or telegraph regarding the case or suspected case. The period of quarantine shall not be terminated until two days after all symptoms have subsided. All laboratory specimens submitted for the purpose of establishing a diagnosis shall be examined *only* in such laboratories as may be designated by the Director, State Department of Public Health.

(b) Contacts

Contacts of cases of plague shall be kept under quarantine until the health officer is satisfied that they have not contracted the infection except that contacts of cases of pneumonic plague shall be kept in quarantine for a period of seven days after last exposure.

Pneumonia
(Infectious)

SECTION 79

Isolation shall be as defined in Section 37. The patient shall be isolated until clinically recovered. These cases should include cases of acute lobar pneumonia and those cases known to be infectious or suspected of being infectious. This includes the virus types of pneumonia.

Poliomyelitis
(Acute anterior)

SECTION 80

Quarantine shall be as defined in Section 35.

(a) Case

The period of quarantine shall be for at least 14 days from the onset of illness and thereafter until all acute symptoms have subsided.

(b) Household Contacts

If the patient is isolated and the premises quarantined, the members of the household shall be confined to the quarantined area; except, at the discretion of the health officer, the wage earners may be released from the quarantined area to live elsewhere, providing their occupations do not bring them in close association with other persons.

(c) Casual Contacts

Casual contacts shall be placed under observation for a period of 14 days after last exposure.

Psittacosis

SECTION 81

Isolation shall be as defined in Section 37. The patient shall be isolated during the acute stages. No restrictions need be placed on contacts.

Rabies
(Human)

SECTION 82

Isolation shall be as defined in Section 37. The patient shall be isolated during the course of the disease. No restrictions need be placed on contacts of a human case.

Rabies
(Animal)

SECTION 83

(a) Case

Any animal known to be infected with rabies or suspected of having rabies shall be placed in confinement under proper care and observation and shall not be killed or released until 10 days shall have elapsed dating from the beginning of the confinement. If the animal dies, or has been killed under suspicion of having rabies, its head shall be removed and examined in an approved public health laboratory.

(b) Contacts

Animal contacts of known or suspected cases of rabies shall be placed in confinement for a period of at least 90 days before being released from confinement and observation.

If rabies is known to have become endemic or epidemic within a given area, the local health officer shall establish a quarantine and shall define the boundaries of the endemic area and specify the animals subject to quarantine, and all such animals within the quarantined area shall be kept in strict confinement upon the private premises of the owner, or if taken off the premises of the owner shall be kept under restraint by leash not over 5 feet in length in charge of a responsible person.

When the health officer establishes such a quarantine such quarantine shall be for a minimum period of 90 days after the last known case of rabies in the quarantined area. When the boundaries of the quarantined area have been defined, no animals subject to the quarantine shall be removed from the quarantined area during the duration of the quarantine without the written permission of the health officer.

(c) Persons known to have been bitten by rabid animals or suspected rabid animals shall be placed under observation by the health officer and should be encouraged to have proper treatment.

Relapsing Fever

SECTION 84

No restrictions on case or contacts. Reportable only.

Rheumatic Fever

SECTION 85

No restrictions on case or contacts. Reportable only.

Rocky Mountain Spotted Fever

SECTION 86

No restrictions on case or contacts. Reportable only.

Scarlet Fever

SECTION 87

Quarantine shall be as defined in Section 35.

(a) Case

The period of quarantine shall be for a period of 14 days from the onset of acute symptoms, and as much longer as is necessary for the complete disappearance of inflammation of the nose, and throat, and the cessation of discharges from the nose, throat, ears or suppurating glands.

(b) Household Contacts

If the patient is isolated and the premises quarantined, the members of the household shall be confined to the quarantined area except that, at the discretion of the health officer, adult members who are wage earners may be released to live elsewhere, provided their occupations do not bring them in close association with other persons or involve the handling of milk or other foods. If the patient is removed to a hospital, the members of the household shall be quarantined for a period of seven days after last exposure, with the exception of the wage earner, who may be released as provided above.

(c) Casual Contacts

Persons who have come in contact with a case and who do not reside within the premises under quarantine, shall be kept under observation by the health officer for a period of seven days after last exposure. During this period they shall, at the discretion of the health officer, be excluded from any occupation or activity which brings them in close association with people, or involves the handling of milk or other foods to be consumed by the public.

Septic Sore Throat

(Epidemic)

SECTION 88

Isolation shall be as defined in Section 37. The patient shall be isolated until clinically recovered, except milk handlers who shall be excluded from their occupation until the health officer deems that it is safe for them to return to their occupation. No restrictions on contacts. The health officer shall investigate outbreaks of septic sore throat and when a milk supply is found to be the source shall take such steps as are necessary to prevent the milk being used by the public until determined to be safe for human consumption.

Smallpox

SECTION 89

Quarantine shall be as defined in Section 35. The period of quarantine shall be until clinical recovery, and until the scabs have separated and the scars have completely healed. Any unvaccinated person remaining on the premises shall be held in quarantine for 14 days after the termination of the quarantine of the patient.

HOUSEHOLD CONTACTS

SECTION 89.10

If the patient is isolated and the premises quarantined, the members of the household shall be confined to the quarantined

area, except that any person who wishes to be released from the quarantined area to live elsewhere may do so under the following conditions:

- (a) If he has proved to the satisfaction of the health officer that he has had smallpox, or
- (b) If he has proved to the satisfaction of the health officer that he has been successfully vaccinated against smallpox within the preceding five years, or
- (c) If he has submitted to vaccination against smallpox, and has proved to the satisfaction of the health officer that the vaccination is successful or that there is evidence of immunity. Such contact shall remain in quarantine until released by the health officer with this evidence or protection.

CASUAL CONTACTS

SECTION 89.20

A person who has been exposed to the risk of contracting the disease by proximity to a case or to a suspected case of smallpox, shall be placed in quarantine for a period not less than 14 days from the last date of exposure. Such persons may be released if evidence of protection against smallpox is established to the satisfaction of the health officer as specified for household contacts.

Syphilis

SECTION 90

See Sections 105 to 120.

Tetanus

SECTION 91

Reportable only. No restrictions on case or contacts.

Trachoma

SECTION 92

Isolation shall be as defined in Section 37. The patient shall be isolated during the acute stages and when not under medical treatment satisfactory to the health officer. No restrictions need be placed on contacts.

Trichinosis

SECTION 93

No restrictions on case or contacts. Reportable only. The health officer shall make an investigation to determine the source of infection. If the suspected product is a commercial product the health officer shall report the fact at once to the State Department of Public Health.

Tuberculosis

SECTION 94

Isolation shall be as defined in Section 37.

- (a) Persons having tuberculosis in a communicable stage shall be considered as fulfilling requirements of isolation as long as they are under adequate medical supervision and observe the instructions issued by the local health officer. The isolation shall be adequate for the protection of persons residing within the household as well as the public.
- (b) Persons having tuberculosis in a communicable stage who refuse to observe the instructions of the local health officer and thereby needlessly expose others to infection shall be placed in quarantine until such time as the local health officer feels that such quarantine is no longer necessary for the protection of the public and in the event that such quarantine proves inadequate for the protection of members of the household or community the patient shall be placed in isolation in quarters designated by the local health officer until such time as such isolation is no longer necessary for the protection of the public.
- (c) The person officially in charge of a sanatorium or other place where tuberculosis patients are cared for shall be responsible for immediately notifying the health officer in whose territory a patient resides whenever such patient having tuberculosis in a communicable stage leaves the institution.

Tularemia

SECTION 95

Reportable only. No restrictions on case or contacts.

Typhoid Fever**SECTION 96**

Isolation shall be as defined in Section 36.

(a) Case

The period of isolation shall be until the acute symptoms have subsided and two specimens of feces and urine taken successively at intervals of not less than five days have been determined by the laboratory to be negative for typhoid bacilli. The patient shall not take any part in the preparation, serving, or handling of milk or other food to be consumed by individuals other than his immediate family; nor shall he participate in the management of a dairy or other milk distributing plants, boarding house, restaurant, food store, or any place where food is prepared or stored; nor shall he engage in any occupation bringing him in contact with children, until three successive feces and urine specimens taken at intervals of not less than five days have been determined by the laboratory to be negative for typhoid bacilli. Also see Section 133.

(b) Household Contacts

No restrictions except that no member of the household shall have any part in the preparation or serving of food to persons other than members of his immediate family; nor shall he engage in any occupation which brings him in contact with milk, milk products, milk bottles, or milk utensils. If members of the household are public food handlers and wish to resume their occupation, they shall leave the premises on which the case is isolated and submit at least two feces and urine specimens to the health officer and prove to the satisfaction of the health officer that they are free from infection before resuming their occupation.

(c) Casual Contacts

No restrictions.

Typhus Fever

(Flea borne)—(endemic type)

SECTION 97

Isolation shall be as defined in Section 37. The patient shall be isolated in a vermin free room until clinically recovered. If the premises where the patient resides is vermine free and fleas are not present, no control need be exercised over contacts.

(Continued in next issue)

MORBIDITY ***Complete Reports for Certain Diseases Recorded for Week Ending May 8, 1943 (Civilian Cases)****Chickenpox**

1,762 cases from the following counties: Alameda 184, Butte 6, Contra Costa 6, Fresno 52, Glenn 11, Humboldt 14, Imperial 3, Kern 40, Kings 5, Lassen 1, Los Angeles 646, Madera 2, Marin 12, Merced 3, Monterey 16, Napa 15, Orange 40, Sacramento 61, San Bernardino 33, San Diego 162, San Francisco 189, San Joaquin 37, San Luis Obispo 1, San Mateo 34, Santa Barbara 7, Santa Clara 58, Santa Cruz 1, Solano 42, Sonoma 18, Sutter 4, Tulare 47, Ventura 5, Yuba 7.

German Measles

1,935 cases from the following counties: Alameda 242, Contra Costa 19, Fresno 101, Humboldt 24, Imperial 8, Kern 10, Los Angeles 780, Marin 23, Monterey 14, Orange 87, Placer 1, Sacramento 34, San Bernardino 75, San Diego 136, San Francisco 153, San Joaquin 38, San Luis Obispo 8, San Mateo 10, Santa Barbara 31, Santa Clara 58, Solano 6, Sonoma 54, Tehama 2, Tulare 2, Ventura 10, Yolo 5, Yuba 4.

Measles

1,190 cases from the following counties: Alameda 142, Amador 9, Butte 1, Contra Costa 10, Fresno 18, Humboldt 8, Kern 27, Kings 7, Lassen 1, Los Angeles 387, Madera 3, Marin 1, Merced 1, Monterey 30, Napa 6, Orange 3, Sacramento 30, San Bernardino 22, San Diego 87, San Francisco 124, San Joaquin 20, San Luis Obispo 7, San Mateo 9, Santa Barbara 3, Santa Clara 36, Santa Cruz 6, Shasta 31, Solano 84, Sonoma 3, Sutter 9, Tehama 4, Tulare 55, Yolo 5, Yuba 1.

Mumps

985 cases from the following counties: Alameda 66, Amador 3, Butte 4, Colusa 1, Contra Costa 4, Fresno 28, Humboldt 51, Kern 34, Kings 2, Lassen 2, Los Angeles 241, Madera 4, Marin 7, Merced 2, Monterey 3, Napa 27, Orange 68, Sacramento 18, San Bernardino 14, San Diego 99, San Francisco 100, San Joaquin 73, San Luis

Obispo 4, San Mateo 10, Santa Barbara 5, Santa Clara 52, Shasta 51, Solano 2, Tuolumne 1, Yolo 4, Yuba 5.

Scarlet Fever

142 cases from the following counties: Alameda 6, Contra Costa 2, Fresno 2, Humboldt 1, Kern 2, Los Angeles 37, Marin 1, Monterey 6, Napa 2, Orange 3, Sacramento 3, San Bernardino 3, San Diego 17, San Francisco 13, San Joaquin 1, San Mateo 3, Santa Barbara 5, Santa Clara 25, Solano 4, Sonoma 2, Tulare 3, Ventura 1.

Whooping Cough

604 cases from the following counties: Alameda 51, Butte 8, Contra Costa 1, Del Norte 3, El Dorado 1, Fresno 12, Glenn 5, Humboldt 17, Imperial 2, Kern 19, Los Angeles 175, Madera 6, Marin 9, Merced 5, Monterey 17, Orange 3, Sacramento 23, San Bernardino 7, San Diego 88, San Francisco 44, San Joaquin 12, San Luis Obispo 9, San Mateo 4, Santa Barbara 16, Santa Clara 7, Shasta 8, Solano 3, Sonoma 5, Sutter 7, Tehama 1, Tulare 19, Ventura 5, Yolo 11, California 1.**

Diphtheria

19 cases from the following counties: Alameda 2, Butte 1, Fresno 1, Los Angeles 4, Marin 1, Monterey 3, Sacramento 1, San Francisco 2, San Joaquin 2, Tulare 1, Yuba 1.

Encephalitis (Infectious)

1 case from Alameda County.

Epilepsy

51 cases from the following counties: Los Angeles 41, San Bernardino 1, San Diego 1, San Francisco 1, San Joaquin 3, Sonoma 3, Tulare 1.

Diarrhea of Newborn (Epidemic)

12 cases from the following counties: Los Angeles 11, San Francisco 1.

Dysentery (Bacillary)

3 cases from the following counties: Kern 1, Los Angeles 2.

Food Poisoning

6 cases from the following counties: Los Angeles 1, San Francisco 5.

Influenza (Epidemic)

45 cases reported in the State.

Jaundice (Infectious)

3 cases from the following counties: Fresno 1, Los Angeles 1, Yuba 1.

Malaria

4 cases from the following counties: Alameda 1, Los Angeles 2, Tulare 1.

Meningitis (Meningococcic)

30 cases from the following counties: Alameda 4, Kern 1, Los Angeles 9, Orange 2, Sacramento 2, San Bernardino 1, San Francisco 9, San Joaquin 1, Santa Clara 1.

Paratyphoid Fever

One case from Los Angeles County.

Pneumonia (Infectious)

72 cases reported in the State.

Poliomyelitis (Acute Anterior)

12 cases from the following counties: Alameda 2, Los Angeles 4, Orange 4, San Francisco 1, Tehama 1.

Rabies (Animal)

28 cases from the following counties: Fresno 3, Kern 4, Kings 1, Los Angeles 15, Monterey 4, San Diego 1.

Rheumatic Fever (Acute)

10 cases from the following counties: Alameda 1, Los Angeles 6, San Francisco 2, Solano 1.

Rocky Mountain Spotted Fever

One case from Lassen County.

Tetanus

One case from Los Angeles County.

Typhoid Fever

3 cases from the following counties: Calaveras 1, San Bernardino 2.

Undulant Fever

2 cases from the following counties: Contra Costa 1, San Bernardino 1.

Trichinosis

One case from San Francisco.

Gonorrhea

290 cases reported in the State.

Syphilis

711 cases reported in the State.

* Data regarding the other reportable diseases not listed herein, may be obtained upon request.

** Cases charged to "California" represent patients ill before entering the State or those who contracted their illness traveling about the State throughout the incubation period of the disease. These cases are not chargeable to any one locality.

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